

NON-COUNTY WORKFORCE COMPREHENSIVE POLICY STATEMENT (CPS)

For purposes of this Comprehensive Policy Statement, a “Workforce Member” shall mean all persons authorized to provide a service or perform duties within any DHS facility/program. “Non-County Workforce Member” shall include, but not be limited to, any person performing services under agreement, contract or on a volunteer basis. The term shall also include rotating postgraduate physicians from formally-affiliating teaching programs, students and visiting personnel.

POLICIES	
AMERICANS WITH DISABILITIES ACT (A.D.A.)	(DHS POLICY 189)
<p>The ADA ensures civil rights protections to individuals with disabilities and guarantees equal opportunity in public accommodations, employment, transportation and local government services, and telecommunications. The ADA defines an individual with a disability as one who has a record of having or is regarded as having a physical or mental impairment that substantially limits one or more major life activities. Temporary impairments lasting for a short period of time, such as a few months, do not pose substantial limitations.</p> <p>The ADA prohibits discrimination against any qualified individual with a disability in any employment practice. A qualified individual with a disability is a disabled person who meets legitimate skill, experience, education or other requirements of an employment position that he or she holds or seeks, and who can perform essential job functions with or without reasonable accommodation. Illegal use of drugs is not a disability covered by the ADA. Persons who have a disability covered under ADA may be entitled reasonable accommodations that do not pose an undue hardship to the department. For specific information on reasonable accommodations, contact DHS Human Resources.</p>	
WORKFORCE BEHAVIORAL STANDARDS	(DHS POLICY 792)
<p>It is the expectation that all workforce members including medical and professional staff conduct themselves in a courteous, cooperative and professional manner. The Department of Health Services (DHS) will not tolerate any disruptive, inappropriate, or unprofessional behavior/conduct by any workforce member towards another workforce member, the public, or patients.</p> <p>Any workforce member, including medical and professional staff, who engages in inappropriate conduct of any nature, or exhibits disruptive or unprofessional behavior, or who fails to exercise sound judgment in dealing with another workforce member, the public, or a patient may be subject to termination of agreement, contract or assignment.</p> <p>Disruptive behavior includes any behavior that interferes with communication, teamwork, or safe patient care, or when the behavior has the effect of intimidating or suppressing input by other workforce members. Disruptive behavior can be obvious, for example, verbal outbursts of anger, throwing objects, or disrespectful language. However, it can also be passive or less obvious repeated behaviors such as, not answering questions or returning calls, not performing assigned tasks, or impatient with questions.</p> <p>Further examples of “disruptive behavior” include, but are not limited to:</p> <ol style="list-style-type: none"> 1. Use of language that is profane, vulgar, sexually suggestive or explicit, degrading, or racially, ethnically, or religiously slurring; 2. Sexually-oriented or degrading jokes or comments; 3. Obscene gestures; 4. Oral or written threats to person(s) or property (including in-person, over the telephone, by e-mail, or through other means of communication); 5. Condescending language or voice intonation; 6. Any unwanted touching; and 7. Making inappropriate comments about workforce members or patients, which: <ul style="list-style-type: none"> • Jeopardizes or is inconsistent with the quality of patient care or the ability of others to provide it; • Is unethical; • Constitutes the physical or verbal abuse of patients or other workforce members; or • May place the Department or facility in violation of regulatory/accreditation standards, federal or state laws, court decisions or in jeopardy of liability. <p>There will be no retaliation against anyone who reports a violation of this policy in good faith. However, any workforce member who deliberately makes a false accusation will be subject to disciplinary action or termination of assignment. Moreover, reporting a violation does not protect individuals from any appropriate disciplinary action regarding their own misconduct.</p>	

POLICIES							
CONFLICT OF INTEREST	(DHS POLICY 741.000)						
<p>A non-County workforce member is prohibited from:</p> <ul style="list-style-type: none"> • Participating in or attempting to influence any County decision in which the non-County workforce member has a personal financial interest. • An individual workforce member is prohibited from accepting gifts from vendors or potential vendors. Workforce members may never solicit gifts or accept cash or cash equivalents, such as gift certificates. Generally, gifts from patients or persons on behalf of patients to individual workforce members should not be accepted. If the patient insists, unsolicited gifts of little or no monetary value may be accepted so long as acceptance of the gift does not influence the timeliness and quality of care, treatment or services. • Referring any patient or client for any private reimbursable service to themselves or to any group with which they have a personal financial interest, unless specifically authorized to do so by the Director of DHS or his/her designee (i.e., Chief Medical Officer) after disclosing the nature of the affiliation. • Confidential and other non-public information gathered through contact with patients, clients, or other workforce members, or from departmental records may only be used for official departmental business. • Using any County facility, tool, equipment or supply for non-County or personal purposes (e.g., telephones, fax machines, copiers, computers, e-mail, Internet). 							
DRESS CODE	(DHS POLICY 392.3, 706.1, MOU)						
<p>All workforce members are to dress in a manner that is professional and appropriate for the business atmosphere and health care standards and must not interfere or detract from the DHS mission. It must also be appropriate to the type of work being performed and take in consideration the expectations of our patients, and customers being served.</p> <p>All workforce members are expected to practice personal hygiene that does not interfere with the public and/or coworkers in their work environment.</p> <p>Dress code guidelines are:</p> <ul style="list-style-type: none"> • Identification badges must be worn and readily visible at all times. • Clothing must be clean and pressed and footwear is to be clean and polished. • Hair and fingernails (including artificial nails) must be clean and neatly groomed and of a length that does not interfere with work performance, personal safety, and patient care. Hand and nail care are addressed in the Hand Hygiene in Healthcare Settings policy. Mustaches and beards must be small, trimmed, clean and neatly styled. • Jewelry and cosmetics should be appropriate to a professional business environment. Dangling jewelry, including ornate rings, long necklaces, charm bracelets, or earrings that extend below the ear lobe may not be worn by patient care personnel or staff who operate machinery/equipment with moving parts for safety reasons. • Body piercing jewelry/ornaments worn anywhere other than the ear shall not be displayed. • An appropriate smock/lab coat will be worn, when applicable to job responsibilities. Uniforms and scrubs must be worn in accordance with safety/infection control regulations. The dress code shall be adhered to for clothing worn under lab coats or smocks; lab coat or smocks should be clean and appropriate for the business environment. <p>Business casual is attire that is clean, neat , and more relaxed than traditional professional dress, yet does not distract from the business at hand. The following guidelines shall be adhered to in addition to those above:</p> <table> <tr> <td>Shirts</td><td>Casual shirts, blouses, twin sets, sweaters, polo/golf shirts and turtlenecks are acceptable. County-sponsored or union T-shirts worn on special event days are acceptable. Unacceptable articles include: Denim shirts, sweatshirts, tank tops, halter/tube tops, bare midriff, and sheer or revealing clothing.</td></tr> <tr> <td>Bottoms</td><td>Cotton, knit, lycra combinations and travel slacks are acceptable. Denim and jean-style pants of any color may be worn as the need arises by Information Technology staff that install equipment and cables and other staff that bend, stoop, crawl, and move heavy equipment and/or organize files and other supplies. Unacceptable items include: Shorts, leggings, spandex, gym or sweat pants, jogging outfits and overalls, excessively tight or oversized garments, pants worn below the waistline or low-rise pants showing undergarments.</td></tr> <tr> <td>Dresses & Skirts</td><td>Skirt or dress length should fall just above the knee when seated.</td></tr> </table>		Shirts	Casual shirts, blouses, twin sets, sweaters, polo/golf shirts and turtlenecks are acceptable. County-sponsored or union T-shirts worn on special event days are acceptable. Unacceptable articles include: Denim shirts, sweatshirts, tank tops, halter/tube tops, bare midriff, and sheer or revealing clothing.	Bottoms	Cotton, knit, lycra combinations and travel slacks are acceptable. Denim and jean-style pants of any color may be worn as the need arises by Information Technology staff that install equipment and cables and other staff that bend, stoop, crawl, and move heavy equipment and/or organize files and other supplies. Unacceptable items include: Shorts, leggings, spandex, gym or sweat pants, jogging outfits and overalls, excessively tight or oversized garments, pants worn below the waistline or low-rise pants showing undergarments.	Dresses & Skirts	Skirt or dress length should fall just above the knee when seated.
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POLICIES	
DRESS CODE (cont')	
Footwear	<p>In patient care and safety-sensitive areas (e.g., warehouse), closed toe shoes of safe grip, non-slip sole, non-porous or non canvas material must be worn, sneakers and clogs (with straps) must be white, black or brown vinyl or leather only, with no more than one additional color trim.</p> <p>Socks or hosiery shall be worn at all times by nurses in patient care areas.</p> <p>Unacceptable items include: flip-flops and other beach type shoes and slippers.</p>
Jewelry	<p>Necklaces: More than 18 inches long should be concealed by clothing in safety sensitive areas</p> <p>Earrings: Maximum of two (2) earrings may be worn in each ear in safety-sensitive areas.</p> <p>Workforce members who are or may be assigned direct patient care as safety-sensitive duties, hoops must be no larger than one (1) inch in diameter.</p> <p>Bracelets: No charms or dangling objects may be worn in safety-sensitive areas. Medical bracelets are acceptable.</p> <p>Rings: Maximum of three (3) rings on each hand (must comply with infection control standards in patient care areas)</p> <p>Watches: Watches that pose a safety issue for patients and workforce (e.g., large, sharp edges, elastic bands) are not allowed in patient care areas.</p>
Tattoos	Must be reasonably covered (with exception for cultural or religious purposes)
Accessories	<p>Hats and baseball caps are not permitted, except for those with County, department or union logos worn on special days (exceptions may be allowed for medical reasons).</p> <p>Head scarves and bandannas are prohibited except for medical, religious or cultural reasons.</p> <p>Pins or buttons that are sexually suggestive or create a hostile work environment are prohibited.</p> <p>Exceptions to this policy may be made by the Department Head/designee in circumstances such as County or Department-sponsored events, special occasions, seasonal weather changes, business casual days, special work assignment, and office relocations, but may also be made based on requests for reasonable accommodation (e.g., religious, cultural, medical reasons, etc.)</p>
Any workforce member who reports to work and is not in compliance with this policy may be referred back to their agency or home to change, unless some other remedy can be arranged.	
EQUAL EMPLOYMENT OPPORTUNITY (DHS POLICY 707)	
<p>The Department of Health Services (DHS) is committed to providing equal employment to all qualified persons, regardless of race, color, religious creed, sex, national origin, ancestry, medical condition, marital status, age, physical or mental disability, sexual orientation, or gender identity, and to maintain a non-discriminatory workplace. Complaints of discriminatory practices should be reported to DHS Human Resources or the Los Angeles County Office of Affirmative Action Compliance at (213) 974-1080 or at http://www.oaac.co.la.ca.us.</p>	
POSSESSION OF REQUIRED LICENSURE, CERTIFICATION, REGISTRATION AND/OR PERMIT (DHS POLICY 704)	
<p>A Non-County workforce member whose position requires a current valid license, certification, registration and/or permit to perform the duties of his/her position shall produce original evidence of the required license, certificate, registration and/or permit to DHS Human Resources upon assignment. The non-County workforce member is responsible to ensure his/her license, certificate, registration and/or permit is kept current and in good standing with the appropriate licensing board or agency. Primary source verification will be conducted at the time of assignment, renewal, and during the performance assessment process. Non-County workforce members must provide evidence of renewed licensure, certification, registration, and/or permit status to their department/service area manager and DHS Human Resources prior to the expiration date. Failure to maintain appropriate licensure, certification, registration and/or permit may result in immediate release from assignment.</p>	

POLICIES	
MEDICAL STANDARDS FOR NON-COUNTY WORKFORCE MEMBERS IN DHS HEALTHCARE FACILITIES (DHS POLICY 705, LA COUNTY CIVIL SERVICE RULE 9, CA WELFARE & INSTITUTIONS CODE)	
<p>Prior to starting service at any Los Angeles County healthcare facility, Non-County workforce members are required to furnish appropriate documentation of recent medical exam to the appropriate County occupational/employee health services department prior to working in any County healthcare facility. Non-County workforce members must also submit documentation of health screening as required by the County occupational/employee health services department (i.e., annually, as determined by the OHS/EHS Director, or as required by their assignment).</p>	
SUMMONS AND COMPLAINT/PETITIONS AND SUBPOENAS	
<p>All DHS offices cooperate with legal authorities as necessary to carry out the process of service of legal documents. Depending upon the nature of the request, referrals should be made as follows:</p> <ul style="list-style-type: none"> • Employment/assignment records, etc. - DHS/Facility Human Resources • Protected Health Information (patient information/records) - Health Information Management • Arrest warrants/criminal matters - Office of Public Safety • Public Health Records – Public Health , Public Health Investigations <p>In instances in which the individual must be personally served, such as in serving a warrant for arrest, the Office of Public Safety must be contacted and the non-County workforce member served in a private location. Individual units and individuals will strive to ensure that such service is accomplished without disruption of the work site or embarrassment to the non-County workforce member being served. Should the arrest warrant/criminal matter involve a non-County workforce member, the facility Human Resources staff must also be notified. Most other requests involving a summons and/or subpoena should be referred to the facility Risk Management office.</p>	
NON-COUNTY WORKFORCE MEMBER RIGHTS TO REFUSE AN ASPECT OF PATIENT CARE (WORKPLACE RELIGIOUS FREEDOM ACT OF 2005)	
<p>If an aspect of patient care or treatment is incompatible with a non-County workforce member's personal cultural values or religious beliefs, it is the responsibility of the non-County workforce member to notify his/her department/service area manager of his/her desire to be excluded from such duty by submission of a written request which must include documentation of the basis for the request. A non-County workforce member may not refuse to participate in an aspect of care or treatment at the time or just before the time to perform the treatment or procedure. DHS will take every consideration to appropriately address a non-County workforce member's request. A request to refuse to participate may be denied in an emergency situation where there is no other alternative or qualified person available to provide the care or when the life of a patient is in immediate danger. Such requests must be reviewed by DHS Human Resources, the Office of Affirmative Action Compliance, and County Counsel. A written response denying or approving the request will be provided to the non-County workforce member within ten business days. The non-County workforce member may be offered temporary reassignment of duties while his/her request is under review. If the request is approved, the non-County workforce member must maintain written documentation of the request on his/her person at all times.</p>	
SEXUAL HARRASSMENT	(DHS POLICY 749)
<p>Sexual harassment by any non-County workforce member is an unlawful form of discrimination and will not be tolerated. Sexual harassment is defined as any unwelcome sexual advance, request for sexual favor and/or other verbal or physical conduct of a sexual nature when submission to such conduct is explicitly or implicitly a part of the work relationship, used as a basis for work-related decisions affecting the individual (quid pro quo), has the purpose or effect of unreasonably interfering with a non-County workforce member's work performance or creates an intimidating, hostile or otherwise offensive working environment.</p> <p>A non-County workforce member is prohibited from engaging in any conduct of a sexual nature, either intended or unintended, either with or in the presence of any member of the public or patient with whom the non-County workforce member interacts in any way in the performance of his or her work duties. Examples of conduct which may be of a sexual nature include, but are not limited to, verbal, visual, computer generated (e.g. e-mails), written or physical. Sexual misconduct includes consensual sexual behavior, as well as inappropriate sexual behavior, whether or not it involves other persons or is done in the presence of other persons.</p>	

POLICIES	
TRAINING AND IN-SERVICE EDUCATION REQUIREMENTS	(JOINT COMMISSION, APPLICABLE MOU)
<p>Non-County workforce members are required to comply with specific training and in-service education standards established for individual job functions by their assigned department/service areas to meet regulatory standards. To ensure competency, individual non-County workforce members may be required to participate in specific training or in-service education programs beyond the minimum required training or training interval.</p> <p>Non-County workforce members are responsible for: signing the participant sign-in sheets for each session attended; submitting verification of all onsite training/in-service education and related external training or continuing education programs completed to their immediate supervisor/manager in a timely basis.</p>	
THREAT MANAGEMENT “ZERO TOLERANCE” POLICY	(DHS POLICY 792)
<p>Any threat, threatening behavior, harassment, intimidation, or act of violence against any County or non-County workforce member, patient, visitor or other individual is prohibited on County property or at any location where County-related business is conducted. Examples of such behavior include but are not limited to:</p> <ul style="list-style-type: none"> • Verbal and/or written threats, including threatening electronic mail; • Psychological violence such as: property damage or threats of property damage, bullying; • Off-duty harassment, such as unwanted phone calls, stalking or any other above defined behavior that could reasonably be construed as threatening or intimidating and could affect workplace safety; • Physical acts that could cause harm; and • Conduct that has the purpose or effect of violating a person’s dignity or creating an intimidating, hostile, degrading, humiliating or offensive environment. These types of harassing activities can involve unwanted discussion, taunting, and/or other references to age, sex, sexual orientation, race, national origin, disability or religion. <p>Any non-County workforce member who witnesses or has been told that another person has witnessed or is a victim of any threatening or violent behavior, or is him/herself a victim, must report the incident to DHS Human Resources and the County Police.</p> <p>Violation of this policy may result in any or all of the following:</p> <ul style="list-style-type: none"> • Immediate removal of the threatening individual from the premises, pending investigation; • Arrest and prosecution of the threatening individual for violations of pertinent laws; and/or • Termination of service or contract. <p>Licensed workforce members who violate the “zero tolerance” policy may, depending upon the circumstance, be reported to the appropriate licensing, certification, registration, or permit agency/board.</p>	
ATTENDANCE	(DHS POLICY 751)
<p>Every non-County workforce member is expected to adhere to his/her established work schedule for the purpose of providing necessary services in support of patient care. Each non-County workforce member must abide by his/her defined work start and end times, as well as break times and meal periods. In the event that a non-County workforce member will be absent or tardy, he/she must telephone the staffing office or work site supervisor, in addition to complying with contract agency procedures. Any non-County workforce member who is not in his/her assigned work area and cannot be located at any time during his/her shift will be considered absent from the area without authorization, which may result in written notification to the non-County workforce member describing the cause for reprimand and/or termination of service or contract.</p>	
HAND HYGIENE IN HEALTHCARE SETTINGS	(DHS POLICY 392.3, JOINT COMMISSION)
<p>All healthcare workers who provide direct patient care, have contact with patient care supplies, equipment or food, and laboratory and select pharmacy workers must comply with the following hand hygiene guidelines:</p> <ul style="list-style-type: none"> • Hand washing with water and plain or antimicrobial soap, or decontaminating hands with an antimicrobial agent must be practiced as necessary and in the manner required by infection control guidelines and policies. • Non-County workforce members who provide direct patient care, handle patient supplies, equipment and food are prohibited from wearing artificial nails. Natural nails must be clean with tips less than ¼ inch beyond the tip of the finger. If fingernail polish is worn, it must be in good condition, free of chips, and preferably clear in color. • Wearing rings with stones is discouraged, as they can harbor bacteria and tear gloves. 	

POLICIES	
BLOODBORNE PATHOGENS	(JOINT COMMISSION, CDC, CAL-OSHA)
Each workforce member working in a health care setting must sign acknowledgement that he/she has received and read the Bloodborne Pathogens Information packet prior to providing services in a DHS health facility. Failure to comply with this requirement will result in termination of service or contract.	
IDENTIFICATION BADGES	(DHS POLICY 940)
Each non-County workforce member is required to prominently display his/her official facility identification badge at all times while present on any Los Angeles County facility or while otherwise acting in any work related capacity. It is the individual's responsibility to report a lost or stolen identification badge within five business days to DHS Human Resources. Once an affidavit has been completed attesting to the theft or loss, the non-County workforce member will be required to present a copy of the police report and pay a replacement fee for his/her identification badge. The replacement fee is as follows: \$25 for the first replacement, \$50 for the second replacement, and \$100 for each subsequent identification badge replacement. When service is terminated, the individual must immediately return the badge to his/her supervisor, facility Human Resources office, or agency if the non-County workforce member was retained via an agency service. Failure to adhere to the identification badge policy will result in release from assignment.	
ACCEPTANCE OF GIFTS	(DHS POLICY 740)
Non-County workforce members shall not accept gifts, money, favors, special considerations or things of monetary value for work he/she would be required or expected to perform in the regular course of his/her duties, which includes activities with persons or vendors doing business with the County.	
SOLICITATION	(DHS POLICY 742)
Non-County workforce members shall not solicit in any DHS building or on DHS property for any purpose without prior approval from the Chief Executive Officer or his/her designee. Non-County workforce members shall not solicit for a private vendor or operator the patronage for any County patient or client, nor refer any County patient or client for treatment or service other than as required by the non-County workforce member's regularly assigned work duties.	
This policy does not apply to the extent any non-County workforce member, as part of his or her work assignment, is required to distribute literature and/or process enrollment documents for County administered employee group insurance programs or County sponsored fundraising events.	
CAPPING	(DHS POLICY 743)
Non-County workforce members shall not engage in capping activities on or off County property. Capping is soliciting business for attorneys. A "capper" or "runner" is any person, firm, association, or corporation acting in any manner, or in any capacity, as an agent for an attorney at law in the solicitation of business.	
DUAL COMPENSATION	(DHS POLICY 740)
Non-County workforce members shall not receive compensation from other sources for the performance of his/her County assignment.	
POLITICAL ACTIVITY	(DHS POLICY 744)
Non-County workforce members shall refrain from political activities while performing services for the County.	
A non-County workforce member who engages in the following improper activities shall be subject to immediate disciplinary action and/or termination of services:	
<ol style="list-style-type: none"> 1) Knowingly soliciting or receiving political funds or contributions from County or non-County workforce members or from persons on County eligible lists, except for passage or defeat of a ballot measure affecting the pay, hours, retirement, and service or other working conditions of County employees; 2) Participating in political activities of any kind during working hours or while in uniform; 3) Favoring or discriminating against any employee or person seeking County employment because of political opinions or affiliations; 4) Participating in political activities in a manner so as to represent the County or any of its departments, officers, agencies, or officials, as endorsing a ballot measure, if such endorsement has not previously been given publicly; 5) Directly or indirectly using official authority or influence to interfere with any election; 6) Permitting any person to enter any facility under the non-County workforce member's control for purpose of soliciting or receiving political funds or contributions; 7) Using a County office to confer benefits or detriments in return for political activity, votes, or corrupt considerations; 8) Expending any public resources to promote any partisan position (includes placing signs and placards of a political nature on County property); 9) Using any County property, including computers and e-mail for political activities. 	

POLICIES	
CHILD ABUSE REPORTING	(DHS POLICY ON CHILD ABUSE REPORTING, CA PENAL CODE)
<p>As a non-County workforce member of DHS, a public agency that provides direct health care services to children, you are considered a “mandated reporter” for purposes of this Policy.</p> <p>California Penal Code Section 11166.5 requires Los Angeles County Department of Health Services to provide all mandated reporters who commence service on and after January 1, 1985, with the statement contained in the next paragraph. DHS requires the statement be signed by the non-County workforce member as a requisite to working in any of its facilities.</p> <p>Section 11166 of the Penal Code requires a mandated reporter who, in his/her professional capacity or within the scope of his/her work relationship, has knowledge of or observes a child whom the mandated reporter knows or reasonably suspects has been the victim of child abuse or neglect to report the known or suspected abuse immediately or as soon as practicably possible by telephone and to send, fax, or electronically transmit a written report thereof within 36 hours of receiving the information concerning the incident. The report may include any non-privileged documentary evidence the mandated reporter possesses related to the incident.</p> <p>If after reasonable efforts, a mandated reporter is unable to submit an initial report by telephone, he or she shall immediately or as soon as practicably possible, by fax or electronic submission, make a one-time automated written report on the Department of Justice Form SS8572 and shall also be available to respond to a telephone follow-up call by the agency in which he or she filed the report. The report must also indicate the reason why the mandated reporter was not able to make an initial report by telephone.</p> <p>Reports of suspected child abuse or neglect shall be made by mandated reporters to the local law enforcement agency, County probation or a County welfare department. Child abuse reports may also be made directly to the Los Angeles County Department of Children and Family Services (DCFS) 24-hour hotline at (800) 540-4000, and written reports submitted through their website at http://dcfs.co.la.ca.us. Child abuse reports may be faxed to DCFS at (213) 639-1321.</p>	
ELDER/DEPENDENT ADULT ABUSE REPORTING	(DHS POLICY ON ELDER/DEPENDENT ADULT ABUSE REPORTING , CA WEL. & INST. CODE)
<p>As a non-County workforce member of DHS, a public agency that provides direct health care services to elders and dependent adults, you are considered a “care custodian” for purposes of this Policy.</p> <p>California Welfare and Institutions Code Section 15659 requires Los Angeles County Department of Health Services to provide all “care custodians,” “clergy members,” “health practitioners,” and “employees of an adult protective services agency” who enter into service on or after January 1, 1995, with the following statement prior to commencing his/her service. DHS requires this statement to be signed by the non-County workforce member as a requisite to working in any of its facilities.</p> <p>Section 15630(b)(1) of the Welfare and Institutions Code provides as follows:</p> <p>Any mandated reporter who, in his or her professional capacity, or within the scope of his or her employment, has observed or has knowledge of an incident that reasonably appears to be physical abuse, as defined in Section 15610.63 of the Welfare and Institutions Code, abandonment, abduction, isolation, financial abuse, or neglect, or is told by an elder or dependent adult that he or she has experienced behavior, including an act or omission, constituting physical abuse, as defined in Section 15610.63 of the Welfare and Institutions Code, abandonment, abduction, isolation, financial abuse, or neglect, or reasonably suspects that abuse, shall report the known or suspected instance of abuse by telephone immediately or as soon as practicably possible, and by written report (SOC 341) within two working days, either to the County adult protective agency or to a local law enforcement agency or other agency that licenses the facility where the abuse is alleged to have occurred.</p>	

POLICIES	
DOMESTIC/INTIMATE PARTNER VIOLENCE REPORTING (DHS POLICY ON DOMESTIC/INTIMATE PARTNER VIOLENCE REPORTING, CA PENAL CODE)	
<p>California Penal Code Section 11160 requires any health practitioner providing service in a health facility, clinic, physician's office, local or state public health department, or a clinic or other type of facility operated by a local or state public health department who, in his or her professional capacity or within the scope of his or her service, provides medical services for a physical condition to a patient who he or she knows or reasonably suspects is a person described as follows, shall immediately, or as soon as practically possible, make a report to local law enforcement by telephone and a written report within two working days of receiving information regarding the person.</p> <ul style="list-style-type: none"> Any person suffering from any wound or other physical injury inflicted by his or her own act or inflicted by another where the injury is by means of a firearm. Any person suffering from any wound or other physical injury inflicted upon the person where the injury is the result of assaultive or abusive conduct. 	
SEXUAL ABUSE/SEXUAL COERCION (INAPPROPRIATE BEHAVIOR TOWARD A PATIENT) (JOINT COMMISSION SENTINEL EVENT POLICY AND PROCEDURES)	
<p>Sexual contact between a health care worker and a patient is strictly prohibited and will constitute sexual misconduct sexual assault and/or abuse; this includes intercourse as well as touching the patient's body with sexual intent. Unwanted or nonconsensual sexual contact (with or absent of force) involving a patient and another patient, non-County workforce member, unknown perpetrator or spouse/significant other, while being treated or occurring on the premises of a DHS facility may constitute a criminal act punishable by law. Any non-County workforce member who witnesses or reasonably believes that inappropriate contact and/or sexual assault and/or abuse occurred to a patient must report it to his or her supervisor, local law enforcement, and the DHS Quality Improvement & Patient Safety following Patient Safety Net reporting procedures. If the violation involves a County workforce member, the DHS HR Performance Management unit must also be contacted.</p>	
REPORTING SUSPICIOUS INJURIES	PENAL CODE 11160, 11160.1
<p>In accordance with California Penal Code Section 11160, DHS requires any health practitioner working in a DHS health facility who in his or her professional capacity or within the scope of his or her assignment provides medical services to a patient who he or she knows or reasonably suspects has a suspicious injury to report such injury to local law enforcement immediately or as soon as practicable. Section 11160 requires the reporter to make a report by telephone as soon as practically possible and to make a written report within two (2) working days to the same local law enforcement agency on the form OCJP 920.</p> <p>A suspicious injury includes any wound or other physical injury that either was</p> <ul style="list-style-type: none"> Inflicted by the injured person's own act or by another where the injury is by means of a firearm, or Is suspected to be the result of assaultive or abusive conduct inflicted upon the injured person. <p>Health practitioners working in a DHS health facility who are engaged in compiling evidence during a forensic medical examination for a criminal investigation of sexual assault may be asked to release the report to local law enforcement and other agencies, these reports must be prepared on specified forms: OCJP 923, Adult/Adolescent Sexual Assault and OCJP 925 or OCJP 930, Child/Adolescent Sexual Assault. Health practitioners must follow DHS HIPAA procedures documenting the release of such information.</p>	

POLICIES

SAFEGUARDING PROTECTED HEALTH INFORMATION (PHI)

(DHS POLICY 361.23)

Non-County workforce members shall adhere to the following guidelines when handling a patient's protected health information:

Protected Health Information (PHI) includes:

- Any individually identifiable information relating to the past, present or future physical or mental health or condition of an individual; and
- Any information relating to the provision of health care to an individual; and
- Any information relating to the past, present, or future payment for healthcare provided to an individual; and
- Any individually identifiable patient information such as name, address, telephone number, social security number or health insurance number.

Non-County workforce members must take appropriate steps to ensure the confidentiality of all PHI.

- Oral Communications – Avoid patient related/identifying conversations in public unless necessary to further patient care, research or teaching purposes. Use lowered voices. Never discuss patient care in an elevator.
- Cellular Telephones – Do not use cellular telephones in patient care areas. Cellular telephones are not recommended for use when talking about patient information.
- Telephone Messages – Telephone messages and appointment reminders may be left on answering machines. Use only the minimum amount of information necessary to convey the message.
- Faxing –
 - Only fax PHI necessary to meet requestor's needs.
 - Particularly sensitive information (e.g., relating to mental health, drug and alcohol abuse, communicable disease) should not be transmitted by fax except in an emergency. Notify the recipient prior to faxing sensitive information so they may intercept the fax upon arrival.
 - Only authorized non-County workforce members may fax PHI.
 - A non-County workforce member must obtain written permission from the patient before faxing PHI for any reason other than treatment, payment or health care operations.
 - A special fax form must be used when faxing PHI.
 - Misdirected faxes containing PHI must be reported to the HIPAA Privacy Officer located at the facility.
- E-Mail
 - Use of Internal e-mail (i.e., within the secure DHS network) is permitted to transmit PHI
 - Use of External e-mail (i.e., outside the secure DHS network) is permitted in limited circumstances, when no other more secure method of communication is feasible. External e-mail messages should not be used for transmitting or discussing PHI that is particularly sensitive. E-mail messages shall not communicate or refer to the following: (a) AIDS or HIV diagnosis; (b) results of HIV antibody testing; (c) results of hepatitis antigen testing; (d) a diagnosis of substance abuse; (e) results of drug testing; (f) test results related to routinely processed tissues, including skin biopsies, Pap Smear tests, products of conception, and bone marrow aspirations for morphological evaluation, if they reveal a malignancy; (g) elder or child abuse/neglect; or (h) a diagnosis of a mental disorder.
 - A non-County workforce member must obtain an acknowledgment of receipt of the e-mail. If not received in a timely manner, the non-County workforce member must follow-up with the intended recipient.
 - E-mail containing PHI must not be left on computer screen and the name of the recipient must be checked prior to sending the e-mail.
 - E-mail between a non-County workforce member and a patient may occur only if the patient has a completed e-mail consent form on file and only if a current (within 6 months) authorization has been noted in the medical record.
 - A non-County workforce member must respond to patient e-mails in a timely manner.
 - E-mails to patients must contain a statement that if the e-mail communication is not meeting the patient's needs, the patient may contact the non-County workforce member at his/her work number, by letter at the non-County workforce member's work address or by making an appointment at the work number.

POLICIES

SAFEGUARDING PROTECTED HEALTH INFORMATION (PHI) – CONT'

Electronic Transmission of Clinical Laboratory Tests

A non-County workforce member must obtain a California-compliant authorization from the patient for the patient to receive his/her laboratory results by Internet posting or other electronic means. A patient may revoke this authorization at any time and without penalty, except to the extent that action has been taken in reliance on the authorization.

The transmission of the following clinical laboratory test results (and any other related results) to a patient by Internet posting or other electronic means is prohibited by law: (i) HIV antibody test; (ii) presence of hepatitis antigens; (iii) drug abuse; and (iv) test results related to routinely processed tissues, including skin biopsies, Pap smear tests, products of conception, and bone marrow aspirations for morphological evaluation, if they reveal a malignancy.

Test results must be delivered to the patient in a reasonable time, but not before the results have been reviewed by the non-County workforce member. Laboratory tests transmitted through Internet posting or other electronic manner may only be accessible to the patient using a secure personal identification number.

The non-County workforce member must inform the patient of any charges to be incurred for posting his/her test results on the Internet or any other electronic means.

ACCEPTABLE USE POLICY FOR COUNTY INFORMATION TECHNOLOGY RESOURCES (DHS POLICY 935.20)

Access to County information technology resources and accounts is a privilege granted to individual users based on their work duties. These privileges may be modified or revoked by the County at any time. Each user is responsible for the protection of DHS' County information technology resources. Users must protect all information contained therein as required by local, state and federal laws and regulations.

Workforce members have no expectation of privacy with respect to their use of the County information system assets, because at any time DHS may log, review, or monitor any data created, stored, accessed, sent or received. DHS has, and will exercise, the right to monitor any information stored on any workstation, server or other storage device; monitor any data or information transmitted through the DHS network; and/or monitor sites visited on the DHS Intranet, Internet, chat groups, newsgroups, material downloaded or uploaded from the Internet, and/or e-mail sent and received by workforce members. Activities, communications, or computer usage not related to County business are likely to be monitored. .

Non-County workforce members are prohibited from using County information technology resources for any of the following activities:

- Engaging in unlawful or malicious activities;
- Sending, receiving or accessing pornographic materials;
- Engaging in abusive, threatening, profane, racist, sexist or otherwise objectionable language;
- Misrepresenting oneself or the County;
- Misrepresenting a personal opinion as an official County position;
- Defeating or attempting to defeat security restrictions of County systems or applications;
- Engaging in personal or commercial activities for profit;
- Sending any non-work related messages;
- Broadcasting unsolicited, non-work related messages (spamming);
- Intentionally disseminating any destructive program (e.g., viruses);
- Playing games or accessing non-business related applications, or social networking sites;
- Creating unnecessary or unauthorized network traffic that interferes with the efficient use of County information technology resources (e.g., spending excessive amounts of time on the Internet, engaging in online chat groups, listening to online radio stations, online shopping);
- Attempting to view and/or use another person's accounts, computer files, program, or data without authorization;
- Using County information technology resources to gain unauthorized access to DHS or other systems;
- Using unauthorized wired or wireless connections to DHS networks;
- Copying, downloading, storing, sharing, installing or distributing movies, music, and other materials currently protected by copyright, except as clearly permitted by licensing agreements or fair use laws;
- Using County information technology resources to commit acts that violate state, federal and international laws, including but not limited to laws governing intellectual property;

POLICIES

ACCEPTABLE USE POLICY FOR COUNTY INFORMATION TECHNOLOGY RESOURCES (CONT')

- Participating in activities that may reasonably be construed as a violation of National/Homeland security;
- Posting scams such as pyramid schemes and make-money-quick schemes; or
- Posting or transmitting private, proprietary, or confidential information, including patient information, to unauthorized persons, or without authorization.
- Downloading confidential or patient information or data onto a mobile storage device without authorization from the facility CIO/designee.
- Using Online Web-based Document Sharing Services (e.g., Google Docs, Microsoft Office Live, Open-Office) to store or share DHS data.
- Viewing, accessing, using or disclosing confidential or patient information or data if not authorized as part of the workforce member's job duties.

Workforce members are responsible for safeguarding their passwords for access to the County information technology resources. Workforce members are responsible for all transactions made using their passwords. Workforce members may not provide their password or use their password to provide access to another workforce member; or access the County information technology resource with another workforce member's password or account. Some systems have a universal access password with a secondary password neither of which shall be shared with workforce members who are not authorized to utilize the system.

Users are responsible for ensuring that the use of outside computers and networks, such as the Internet, do not compromise the security of any County information technology resources. This responsibility includes taking reasonable precautions to prevent intruders from accessing any County information technology resources.

The public Internet is uncensored and contains many sites that may be considered offensive in both text and images. Users will use the Internet for approved County business purposes only such as a research tool or for electronic communications. The County's Internet services may be filtered, but users may be exposed to such offensive materials and must and hereby do agree to hold the County harmless should they be exposed to such offensive materials.

County e-mail and data, in either electronic or other forms, are a public record, subject to audit and review by authorized individuals. Users must comply with County and DHS e-mail use policies and proper business etiquette when communicating over e-mail systems.

No workforce member may employ any remote inbound or outbound connections to DHS network resources unless explicitly authorized. Unauthorized Remote Access Services (e.g., LogMeIn, GoToMyPC) are strictly prohibited. Dial-up, DSL, modem, etc. are strictly prohibited.

At no time should any workforce member share their remote access privileges with anyone, including other workforce members or family members.

All non-County workforce members utilizing County information technology resources are held to the following state law: Penal Code Section 502(c) provides:

502 (c) Any person who commits any of the following acts is guilty of a public offense:

- 1) Knowingly accesses and without permission alters, damages, deletes, destroys, or otherwise uses any data, computer, computer system, or computer network in order to either (A) devise or execute any scheme or artifice to defraud, deceive, or extort or (B) wrongly control or obtain money, property, or data.
- 2) Knowingly accesses and without permission takes, copies or makes use of any data from a computer, computer system, or computer network, or takes or copies supporting documentation, whether existing or residing internal or external to a computer, computer system, or computer network.
- 3) Knowingly and without permission uses or causes to be used computer services.
- 4) Knowingly accesses and without permission adds, alters, damages, deletes, or destroys any data, computer software, or computer programs which reside or exist internal or external to a computer, computer system, or computer network.
- 5) Knowingly and without permission disrupts or causes the disruption of computer services or causes the denial of computer services to an authorized user of a computer, computer system, or computer network.

POLICIES	
ACCEPTABLE USE POLICY FOR COUNTY INFORMATION TECHNOLOGY RESOURCES (CONT')	
<p>6) Knowingly and without permission provides or assists in providing a means of accessing a computer, computer system, or computer network is in violation of this section.</p> <p>7) Knowingly and without permission accesses or causes to be accessed any computer, computer system, or computer network.</p> <p>8) Knowingly introduces any computer contaminant into any computer, computer system, or computer network.</p> <p>9) Knowingly and without permission uses the Internet domain name of another individual, corporation, or entity in connection with the sending of one or more electronic mail messages, and thereby damages or causes damage to a computer, computer system, or computer network.</p>	
CHILD SUPPORT COMPLIANCE PROGRAM	(BOS POLICY 6.040)
<p>The Los Angeles County Board of Supervisors established the Child Support Program to ensure that individuals who benefit financially from the County, through employment or contract, are in compliance with their court-ordered child and spousal support obligations. The County regularly reports employment and identification information (i.e. name, address, Social Security number) to the State Directory of New Hires as required by State and Federal law. Employment and identification information may also be forwarded to the Department of Child Support Services to help in locating and tracking those persons who owe child/spousal support.</p>	
SAFELY SURRENDERED BABY LAW	(BOS POLICY 5.135)
<p>Los Angeles County has adopted SB 1368, the Newborn Abandonment Law, often referred to the "Safely Surrendered Baby Law," that provides that no parent or other person having lawful custody of a minor child 72 hours old or younger may be prosecuted for child abandonment if he or she voluntarily surrenders physical custody of a child to any person on duty at a public or private hospital emergency room, or any additional location designated by the Board of Supervisors.</p>	
STATEMENT OF CONFIDENTIALITY	(CA PUBLIC RECORDS ACT, HIPAA)
<p>Information or records concerning any client/patient may not be released without proper authorization in accordance with California Civil Code Section 56.10, the California Public Records Act (California Government Code Sec. 6251 et. seq.) and the federal Health Insurance Portability and Accountability Act (HIPAA).</p> <p>Unauthorized release of confidential information will subject that non-County workforce member to appropriate disciplinary action, which may include termination of services, in addition to possible civil action.</p>	
SMOKING	(DHS POLICY 381)
<p>Non-County workforce members and members of the public shall not smoke or carry any ignited smoking device or product inside a County facility, or in an outdoor area within 20 feet of a main exit, entrance, or operable window of a facility.</p>	
WORKFORCE MEMBER RESPONSIBILITIES DURING AN EMERGENCY	(DHS POLICY 911)
<p>DHS workforce are members of the County's Emergency Response Team, and in the event of an emergency are expected to report for emergency-related duties once their critical personal and family emergency responsibilities have been met.</p> <p>An emergency is defined as a dangerous incident similar to a disaster. An emergency can usually be controlled within the scope of local or community resources. On the other hand, a disaster is a dangerous situation that causes significant human and economic loss and demands a crisis response beyond the scope of any single agency or service, such as the fire or police department. In legal terms, a disaster requires resources beyond those available within the County, its political jurisdictions, and special districts.</p> <p>An emergency involves such occurrences as exposure to a biological, chemical, nuclear or radiological weapon, building collapse, civil unrest, drought, earthquake, explosion, firestorm, hazardous material spill, hurricane, pestilence, major power outage, heavy rains/flood, terrorism, tidal wave, tornado, and air/land/sea transportation collisions which could result in a disaster.</p>	

POLICIES	
WORKFORCE MEMBER RESPONSIBILITIES DURING AN EMERGENCY (con't)	
<p>On Duty Response</p> <p>Non-County workforce members who may be delegated specific emergency response assignments, such as responsibility for acting in an Incident Command System role (Departmental Operation Center (DOC), PH Emergency Control Center (ECC), Hospital Emergency Incident Command System (HEICS), Public Health Incident Command System (PHICS)), or providing unit status reports, must respond in accordance with those assignments.</p> <p>Non-County workforce members who have been delegated specific emergency response assignments (pre-designated assignments) will be notified by their supervisor and provided with all necessary training, equipment, and other resources to facilitate response to the emergency.</p> <p>Non-County workforce members at work during an emergency or disaster who do not have pre-designated emergency response assignments are support resources and should wait for instructions from their supervisor (or designee), an emergency management officer or the Building Emergency Coordinator (BEC).</p> <p>Off Duty Response</p> <p>If you do not have an emergency assignment, listen to the local radio and/or television stations for emergency announcements from the Los Angeles County Department of Health Services or the Los Angeles County Emergency Operations Center. If none, report to your workplace as scheduled.</p> <p>Non-County workforce members who may be unable to contact their facility, should call the DHS ComLine at (323) 890-7750 for information on the status of DHS facilities and what actions workforce members are expected to take.</p>	
TELEPHONE USAGE	(DHS POLICY 861.3)
<p>County telephones, which include County cellular telephones, are for County business.</p> <p>Cellular telephones must be turned off in facilities where they may interfere with medical equipment.</p> <p>California law, effective 7/1/08, prohibits drivers from talking on cellular telephones while driving unless the driver is at least eighteen (18) years old and is using a hands-free device. A workforce member who violates this law may be subject to dismissal in addition to any penalties imposed by a state or local agency. It is recommended that workforce members operating a County vehicle not talk on a cellular telephone (even with hands-free device) while driving but should pull over to a safe location or parking lot to conduct a telephone conversation.</p> <p>Personal calls and the conduct of personal business should be on the non-County workforce member's own time (off duty, lunch or breaks) using public telephones or personal cellular telephones.</p> <p>All cellular telephones must be kept in either "vibrate" or "silent" mode during business hours.</p>	